

Attachment A—Zachary Rehl’s Certificate of Release or Discharge

CAUTION: NOT TO BE USED FOR
IDENTIFICATION PURPOSESTHIS IS AN IMPORTANT
RECORD. SAFEGUARD IT.ANY ALTERATIONS IN SHADED
AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

This Report Contains Information Subject to the Privacy Act of 1974, As Amended.

1. NAME (Last, First, Middle) REHL ZACHARY WILLIAM		2. DEPARTMENT, COMPONENT AND BRANCH USMC-11		3. SOCIAL SECURITY NUMBER 159 66 3662	
4a. GRADE, RATE OR RANK CPL	b. PAY GRADE E4	5. DATE OF BIRTH (YYYYMMDD) 19850618	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 20120530		
7a. PLACE OF ENTRY INTO ACTIVE DUTY FORT DIX, NJ		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 871 WILLOW STREET, SOUTHAMPTON, (BUCKS), PA, US, 18966			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HQHOSDN MCAS YUMA, AZ		b. STATION WHERE SEPARATED IPAC MCAS YUMA, AZ RUC 45644			
9. COMMAND TO WHICH TRANSFERRED N/A			10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$ 400,000		
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 3112- TRAFFIC MANAGEMENT SPECIALIST (3 YEARS)		12. RECORD OF SERVICE		YEAR(S)	MONTH(S)
		a. DATE ENTERED AD THIS PERIOD		2008	10
		b. SEPARATION DATE THIS PERIOD		2012	05
		c. NET ACTIVE SERVICE THIS PERIOD		03	07
		d. TOTAL PRIOR ACTIVE SERVICE		00	00
		e. TOTAL PRIOR INACTIVE SERVICE		00	00
		f. FOREIGN SERVICE		00	00
		g. SEA SERVICE		00	00
		h. INITIAL ENTRY TRAINING		00	07
i. EFFECTIVE DATE OF PAY GRADE		2011	12	01	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) MARINE CORPS GOOD CONDUCT MEDAL, GLOBAL WAR ON TERRORISM SERVICE MEDAL, NATIONAL DEFENSE SERVICE MEDAL, LETTER OF APPRECIATION, NAVY UNIT COMMENDATION, RIFLE SHARPSHOOTER BADGE.		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) BASIC DISTRIBUTION MANAGEMENT 2009			
15a. COMMISSIONED THROUGH SERVICE ACADEMY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If yes, years of commitment: _____) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
16. DAYS ACCRUED LEAVE PAID RLB 0.0	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
18. REMARKS GOOD CONDUCT MEDAL PERIOD COMMENCED 20111014. DELAYED ENTRY PROGRAM 20080828 TO 20081013. MEMBER CONTRIBUTED \$1,200 TO THE MGIB. DISABILITY 10%. VA CODES 5201/5019/0000. 45644-2012-0477					
The information contained here in is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.					
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) 120 E FORT ST SHIPPENSBURG PA 17257		b. NEAREST RELATIVE (Name and address - include Zip Code) TANYA M ZWANETSKY (MOTHER) 871 WILLOW ST, SOUTHAMPTON, PA 18966			
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) PA OFFICE OF VETERANS AFFAIRS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
21a. MEMBER SIGNATURE 	b. DATE (YYYYMMDD) 20120502	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) MCCAIN LETICIA M 1097419546		b. DATE (YYYYMMDD) 20120502	

DD FORM 214, AUG-2009

PREVIOUS EDITION IS OBSOLETE.

MEMBER - 1
Adobe Designer 8.0

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ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

**CORRECTION TO DD FORM 214,
CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY**

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1. NAME (Last, First, Middle) REHL, ZACHARY W.		2. DEPARTMENT, COMPONENT AND BRANCH USMC-11		3. SOCIAL SECURITY NUMBER (Also, Service Number if applicable)				
4. MAILING ADDRESS (Include ZIP Code) 120 E. FORT ST. SHIPPENSSBURG, PA 17257				159	66			
5. ORIGINAL DD FORM 214 IS CORRECTED AS INDICATED BELOW:								
ITEM NO.	CORRECTED TO READ							
BLK 18	SEPARATION DATE ON DD FORM 214 BEING CORRECTED: 20120530 DOCUMENT PREPARED FOR FINANCE OFFICERS ENDORSEMENT ONLY. REF DD214 #45644-2012-0477. -----AND NO OTHERS-----							
45644-2012-0041								
6. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) PA OFFICE OF VETERANS AFFAIRS								
<table border="1"> <tr> <td>X</td> <td>YES</td> <td>NO</td> </tr> </table>						X	YES	NO
X	YES	NO						
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)								
<table border="1"> <tr> <td>X</td> <td>YES</td> <td>NO</td> </tr> </table>						X	YES	NO
X	YES	NO						
7. DATE (YYYYMMDD)	8. OFFICIAL AUTHORIZED TO SIGN							
20120424	a. TYPED NAME (Last, First, Middle Initial) MCCAIN, L. V.	b. GRADE GS7	c. TITLE SEPS CHIEF, BY DIR	d. SIGNATURE 				